**State of Montana**
Montana Board of Horse Racing
Montana Department of Commerce
Attention DO Accounting
301 S Park Ave.
Helena, MT 59620
406-841-2725

License #:
_____

Check# or Cash; _____

## Assistant Trainer Application - $50

_____
***Signature of Approval by Steward for Assistant Trainer***

***Incomplete/inaccurate applications will not be processed! Fill in required information. ** MUST BE 18 YEARS OR OLDER ****

**1.** Name: _____
First Middle Last

**2.** Address: _____
Street Address City State Zip Code

**3.** Mailing Address: _____
***(Only if different)*** Street Address City State Zip Code

**4.** Social Security: _____ **5.** Telephone: _____

**6.** Date of birth: _____ **7.** Place of birth: _____
City & State

**8.** Name of licensed trainer you are assisting: _____

**9.** Are you under suspension, set down, ruled off, or otherwise debarred from participating in racing by any racing organization, association, commission or other turf authority in the United States or elsewhere? ☐ Yes or ☐ No. If 'Yes', give details:

_____

_____

**10.** Have you ever been arrested or convicted of violating the law (except minor traffic violations)? ☐ Yes or ☐ No. If 'Yes', give details: _____

_____

**11.** Are you currently on probation or parole in Montana or anywhere? ☐ Yes or ☐ No. If 'Yes', give details: _____

_____

**12.** Have you been previously licensed as a trainer? ☐ Yes or ☐ No. If 'No', have you successfully passed the trainer's exam for Montana? ☐ Yes or ☐ No. If 'Yes', what year did you take the trainer's exam? _____

**13.** Have you been previously licensed by the Montana Board of Horse Racing? ☐ Yes or ☐ No. If 'Yes', list the three (3) **most recent** years and license types: _____

_____

**14.** Do you have or have you ever had a license from another state? ☐ Yes or ☐ No. If 'Yes', list the three (3) **most recent** years, states, and license types: _____

_____

By the acceptance of any license pursuant to this application, I agree to abide by the Rules and Regulations of the Montana Board of Horse Racing. I hereby certify that I have read the foregoing application and affirm that every statement contained therein is true and correctly set forth. I do hereby agree as a condition precedent to the receiving of said license that the same may at any time be summarily revoked, cancelled, temporarily suspended or withdrawn by said Montana Board of Horse Racing, and said license may be revoked at any time for misstatements or omissions in the foregoing application.

**15.** Print Name:_____ **16.** Email Address: _____

**17.** Signature: _____ **18.** Date: _____